

COMMERCIAL WATERCRAFT PERSONAL PROPERTY LISTING OF SHIPS AND VESSELS

→ Date Due:

Vessel Name:

Commercial Vessel Tax No.:

UBI No.:

Note: If this vessel is registered with the Department of Licensing as a pleasure craft and the Watercraft Excise Tax has been paid, please return this listing along with a copy of your Certificate of Registration showing payment of that tax.

		ON If partnership, attach list of all partners and spouses. If d FEIN number. Provide attachments in the following format.	
-	•		
Birthdate:	· · · · · · · · · · · · · · · · · · ·	Social Security No.:	
Home Addı			
Mailing Ad			
Spouse's N	fame:		
Birthdate:		Social Security No.:	
	e of the spouse to appear on the listing?		
Home Phon	ne:	Contact Message Phone:	
If listed un	nder a business name:		
Physical Ac	ddress:		
Mailing Ad	ldress:		
Business Ph	Business Phone: Fax No.:		
If leased, c	complete the following:		
Lessor Nan	ne:		
Lessor Add	dress:		
	Lessor Phone: Fax No.:		
B. SELLER I	INFORMATION		
Seller's Na		OID (Owner ID) No.:	
	Seller's Name: OID (Owner ID) No.: Seller's Current Address:		
Seller's Co	entact Phone:		
	SE PRICE DETAIL (Attach a copy of t	he Purchase/Sale Agreement)	
Date of Pur	·		
_	ssel Price		
Motor Price	Motor Price (if separate) \$		
Accessories Price (if separate)\$			
Total Purc	chase Price (exclude fees, licenses, and taxe	es) \$	
Date of Ent	try into Washington Waters for Commercia	l Purposes (month/day/year)	

SHIP OR VESSEL INFORMATION Length: _____ Width: _____ Depth: Model: _____ Year Built: ___ Make: Aluminum Fiberglass Steel Wood Other **Hull Material (check one):** ☐ Single Diesel ☐ Single Gas **Engine Type (check one):** Outboard Only Twin Diesel Twin Gas I/O Only Triple Diesel Triple Gas Year: Make: Model: Horsepower: Type of Use (check one): (b) Purse Seiner (c) Longliner 1. Commercial Fishing (a) Trawler (d) Gillnet (e) Crabber (f) Other (specify) Constructed per Classification Society Standards? Yes No If yes, specify Classification Society: Capacity in cubic feet of refrigeration and cooling equipment: Type of chilling: Water Ice Brine (c) Powered (d) 2. Charter/Time Share (a) Bareboat (b) Skippered (a) Barge, Covered (b) Barge, Uncovered 3. Freight (c) Other (specify)_____ 4. Towing/Pushing (a) Towboat (b) Pushboat 5. Other (specify 6. Personal Pleasure (If checked, refer to note on front page) Department of Licensing WN No.: Federal Dept. of Fish/Wildlife Documentation No.: Vessel Registration No.: Hull Identification No.: Port of Registry: Name of Moorage Facility: Dock/Slip No.: Address of Facility: _____ County in Which Moored: ____ **SIGNATURE** The undersigned hereby certifies that to the best of their knowledge the above information is true and correct. Name (Print): _____ Date: ____

Name (Signature):